

Genentech, Inc.

1 DNA WAY
South San Francisco, CA 94080
(650) 225-1000
Facsimile: (650) 952-9881

FACSIMILE TRANSMITTAL

DATE: September 17, 2004

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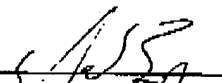
NAME: Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Fax No.: (703) 872-9306

FROM: David W Evans
Registration No.: *

RE: U.S. Serial No.: 10/676,706
Our Docket No.: P1845R1C2

Number of Pages including this cover sheet - 19

CERTIFICATION OF FACSIMILE TRANSMISSION UNDER 37 CFR § 1.8	
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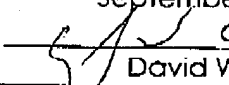
Enclosed for consideration and entry on the record in connection with the above application are: this cover page; Amendment; Response; Petition for 1 Month Extension; and Terminal Disclaimer

* A copy of a document pursuant to 37 C.F.R. §10.9(b) is attached as proof of the authorization of the above to prosecute the attached application. The original of this document is on file in the Office of Enrollment and Discipline

SEP 17 2004

Patent Docket P1845R1C2

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of Dean R. Artis et al. Serial No.: 10/676,706 Filed: 30 September 2003 For: INTEGRIN RECEPTOR INHIBITORS	Group Art Unit: 1626 Examiner: Shameem, Golam M. <div style="text-align: center;"> <small>CERTIFICATE OF FACSIMILE</small> <small>I hereby certify that this correspondence, consisting of Amendment Transmittal, Response and Amendment Under 37 CFR § 1.111 and Limited Recognition Under 37 CFR § 10.9(b), Under 35 C.F.R. § 1.121, is being facsimile transmitted to the Assistant Commissioner of Patents, Washington, D.C. on</small> September 17, 2004  David W Evans </div>
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AMENDMENT TRANSMITTALAssistant Commissioner of Patents
Washington, D.C. 20231

Sir:

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated as shown below.

	Claims Remaining After Amendment		Highest No. Previously Paid For	Present Extra	Rate	Additional Fees
Total	11	-	20	0	18	\$0.00
Independent	1	-	1	0	80	\$0.00
___ Multiple dependent claim(s), if any					270	\$
Total Fee Calculation						\$0.00

☒ No additional fee is required.
☐ The Commissioner is hereby authorized to charge Deposit Account No. 07-0630 in the amount of \$____. **A duplicate copy of this transmittal is enclosed.**
☒ Petition for Extension of Time is enclosed.

The Commissioner is hereby authorized to charge any additional fees required under 37 CFR 1.16 and 1.17, or credit overpayment to Deposit Account No. 07-0630. **A duplicate copy of this sheet is enclosed.**

Respectfully submitted,
GENENTECH, INC.

Date: September 17, 2004

By: David W Evans
Reg. No. *

Telephone No. (650) 225-1739




09157

PATENT TRADEMARK OFFICE

*A copy of a document pursuant to 37 C.F.R. § 10.9(b) is attached as proof of the authorization of the above to prosecute the attached application. The original of this document is on file in the Office of Enrollment and Discipline.

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